



The City of Martinsville is an Equal Opportunity Employer. No person shall be refused employment, denied promotion or assignment, discharged or otherwise discriminated against or given preference in any aspect of the employment relationship on the basis of race, gender, religion, age political affiliation, physical or mental disability, or any other non-job related factor, except when certain physical and mental requirements are bona-fide occupational qualifications. **Applications are accepted for vacant positions only.**

**APPLICATION FOR
EMPLOYMENT**
Human Resources Office
PO Box 1112
55 West Church Street
Martinsville, VA 24114-1112

(276) 403-5181; FAX (276) 403-5375

Internet:
<http://www.martinsville-va.gov>

INSTRUCTIONS – Please complete all sections of this application. Your application will be used as part of the certification process and should represent your best effort. Applications must be received by the deadline date and will be retained in an active file for twelve months. All statements are subject to investigation and verification. An incomplete or falsified application is grounds for immediate disqualification. A resume will not be accepted in lieu of a completed application.

PRINT OR TYPE ALL INFORMATION

POSITION APPLIED FOR _____ **DATE OF APPLICATION** _____
(Give Exact Title)
WHEN CAN YOU BEGIN WORK? _____ **SALARY EXPECTED** _____

PERSONAL INFORMATION

Last Name	First Name	MI	Mailing Address	City	State	Zip	Telephone Number	
							Home	Other

If offered a position, within three working days of employment you will be required to present documents proving identity and eligibility to work in the United States as required by the Immigration Reform and Control Act of 1986. Are you legally eligible to work in the U.S.? ____ Yes ____ No

Except for moving traffic violations and juvenile offenses, have you ever been convicted (found guilty, sentenced, or fined) of any violation of law? ____ Yes ____ No. Include conviction by general court martial while in the military service. Your criminal history will be checked; falsification of an employment application is grounds for immediate disqualification or dismissal. A conviction does not automatically disqualify you as an applicant. The nature of the offense and when it occurred will be considered. If yes, explain and give all the facts. _____

Have you ever been dismissed or forced to resign from a job? Please explain. _____

Are you currently employed by, or have you ever worked for, the City? ____ Yes ____ No	Department	When
Do you have any relatives that work for the City? ____ Yes ____ No If yes, list name(s).	Department	Relationship

Driver's License Information. If the position requires a driver's license, please provide the following information. Answer only if required.	Regular Driver's License #		Commercial Driver's License #		
	State	Expiration Date	State	Class or Type	Expiration Date

JOB-RELATED EDUCATION AND TRAINING

Name of School	Address of School City and State	Major Field of Study (If Applicable)	Highest Grade Completed or Degree Received
High School (includes GED equivalency)			
College or University			
Graduate Work			
Technical/Military/Other			
Job-Related Skills			
Office Machinery, Heavy Equipment you can operate			
Computer Skills/Software			
Licenses/Certifications			

WORK EXPERIENCE

Beginning with your current or last position, list your full-time, part-time, and temporary work experience. Include job-related military service assignments and volunteer activities. Additional sheets or a resume may be attached, if needed.

Name of Employer Address	Current/Last Position Held	From To	Name and Title of Immediate Supervisor Telephone Number	Starting Salary
Number of Hours Worked per week ____ FT ____ PT	Number of Employees Supervised	Reason for Leaving If currently employed, may we contact your employer?		Final Salary
Duties performed:				

Name of Employer Address	Last Position Held	From To	Name and Title of Immediate Supervisor Telephone Number	Starting Salary
Number of Hours Worked per week ____ FT ____ PT	Number of Employees Supervised	Reason for Leaving		Final Salary
Duties performed:				

Name of Employer Address	Last Position Held	From	Name and Title of Immediate Supervisor Telephone Number	Starting Salary
		To		
Number of Hours Worked per week ____ FT ____ PT	Number of Employees Supervised	Reason for Leaving		Final Salary
Duties performed:				

Name of Employer Address	Last Position Held	From	Name and Title of Immediate Supervisor Telephone Number	Starting Salary
		To		
Number of Hours Worked per week ____ FT ____ PT	Number of Employees Supervised	Reason for Leaving		Final Salary
Duties performed:				

APPLICANT CERTIFICATION AND AUTHORIZATION

I certify that all statements made in this application are true, complete and correct to the best of my knowledge and belief, and that any false statements or major omissions shall be considered sufficient cause for employment disqualification or dismissal. I further acknowledge that any or all information provided by me is subject to verification and I authorize the City of Martinsville to conduct a personal background investigation of me, including any current or prior criminal arrests, convictions, and driving history. By my signature below, I authorize the City of Martinsville to contact my current and/or all former employers, as well as schools or other educational institutions that I may have attended, and obtain any information about my qualifications for employment including current or prior work history, scholastic ratings and records, and any other information they may have regarding me, whether or not it is on their records. I understand that this completed application and any materials submitted with it are the property of the City of Martinsville. I also understand that any offer of employment is contingent upon my ability to produce any required documentation and pass various job-related examinations prior to my employment being official and complete.

Applicant's Signature	Signature Date
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**City of Martinsville
Equal Employment Opportunity Information**

**PLEASE COMPLETE THIS FORM – IT IS VOLUNTARY AND WILL NOT BE USED FOR MAKING
EMPLOYMENT DECISIONS.**

The information requested in this section is voluntary; should you refuse to provide the information, no adverse treatment will result with regard to the employment or selection process. The data will assure compliance with State and Federal Equal Employment Opportunity laws and help the City meet the reporting requirements of these laws. This data *will not* be used for making employment decisions, but will allow the City of Martinsville to measure the effectiveness of our Equal Employment Opportunity Policy. After the information is received, this page will be removed and will not be retained with your employment application.

TODAY'S DATE	MALE	FEMALE
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ETHNIC ORIGIN. PLEASE CHECK THE ONE BOX WHICH BEST DESCRIBES YOUR ETHNIC ORIGIN.

<input type="checkbox"/>	White (not of Hispanic origin) – All persons with origins in any of the peoples of Europe, North Africa or the Middle East
<input type="checkbox"/>	Black (not of Hispanic origin) – All persons with origins in any of the black racial groups of Africa.
<input type="checkbox"/>	Hispanic – All persons of Mexican, Puerto Rican, Cuban, Central or South America, or other Spanish culture or origin, regardless of race.
<input type="checkbox"/>	Asian or Pacific Islander – All persons with origins in any of the original peoples of the Far East, Southeast Asia, the Indian subcontinent, or the Pacific Islands. This area includes China, India, Japan, Korea and Samoa.
<input type="checkbox"/>	American Indian or Alaskan Native – All persons with origins in any of the original peoples of North America, and who maintain cultural identification through tribal affiliation or community recognition.

**CHECK THE ONE BOX THAT BEST DESCRIBES THE HIGHEST LEVEL OF EDUCATION
YOU HAVE COMPLETED.**

<input type="checkbox"/>	Less than 8th Grade	<input type="checkbox"/>	Completed 8th Grade
<input type="checkbox"/>	Attended High School	<input type="checkbox"/>	High School Graduate or Equivalent
<input type="checkbox"/>	Attended College	<input type="checkbox"/>	Four-year College Graduate
<input type="checkbox"/>	Associate Degree	<input type="checkbox"/>	Other

**CHECK THE BOX WHICH BEST DESCRIBES HOW YOU HEARD ABOUT
EMPLOYMENT OPPORTUNITIES WITH
THE CITY OF MARTINSVILLE.**

<input type="checkbox"/>	Virginia Employment Commission	<input type="checkbox"/>	City employee
<input type="checkbox"/>	Newspaper Advertisement	<input type="checkbox"/>	City cable, City Internet, or City Job Announcement
<input type="checkbox"/>	Friend or Relative	<input type="checkbox"/>	Other (identify)

Thank you for considering the City of Martinsville as a possible employer. If you need clarification or additional information about this form, please contact the Human Resources Office at (276) 403-5181.